

## DECLARATION AND POWER OF ATTORNEY UtilityApplication

As a below named inventor, I hereby declare that:

My residence, post offi	ce address and cit	izenship are	as stated below ne	xt to my name.	
I believe I am the origin first and joint inventor for which a patent is so CIRCUIT INTEREO	(if plural names a ught on the invent	re listed bel tion entitled	ow) of the subject in a "MEASUREMI	matter which is CNT OF INTE	claimed and GRATED
(Check One)	is attached was filed o		2004, assigned Se	rial No. 10/806,	680
I hereby state that I have specification, including	e reviewed and ung the claims, as am	nderstand th ended by ar	e contents of the above amendment(s) re	ove-identified ferred to above.	
I acknowledge the duty application in accordan					this
I hereby claim foreign of any foreign application international application America, listed below a for patent or inventor's before that of the application	ion(s) for patent or on which designate and have also iden certificate, or of a	r inventor's ed at least or tified below my PCT into	certificate, or § 365 he country other than y, by checking the be crnational application	(a) of any PCT in the United Statos, any foreign	ates of application
Prior Foreign				Priorit	y Claimed
Application Number(s)	Country	J <b>D</b>	até of Filing	Yes	No
				₫.	
I hereby claim the bene provisional application		, United Sta	tes Code § 119(e) o	of any United Sta	ates
Application Number(s)		Filing Date			

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

II C Parent	PCT Parent Number	Parent Filing Date	Status-Patented, Pending or Abandoned
		in the second se	**************************************

POWER OF ATTORNEY: As a named inventor, I hereby appoint as my attorneys with full power of substitution and revocation, to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Jeffrey A. Miller, Reg. No. 35,287.

Send Correspondence	ORRICK, HERRINGTON & SUTCLIFFE LLP	
and direct all	4 Park Plaza Suite 1600	
telephone calls to:	Irvine, California 92614-2558	
Jeffrey A. Miller		
(650) 614-7660		

201	FULL NAME OF INVENTOR	FIRST Name Narain	MIDDLE Initial	LAST Name	
	RESIDENCE & CITIZENSHIP	City San Jose	State or Foreign Country	Country of Citizen United States	ship
	POST OFFICE ADDRESS	Post Office Address 6535 Robin Ridge Ct.	City San Jose	State of Country California	Zip Code 97135
202	FULL NAME OF INVENTOR	FIRST Name	MIDDLE Initial	LAST Name	
<u> </u>	RESIDENCE &	City Fremont	State or Foreign Country	Country of Citizen United States	ship
	POST OFFICE ADDRESS	Post Office Address 155 Jewel Ter.	City: Fremont	State or Country California	Zip Code 94536
4					- Managaran
203	FULL NAME OF INVENTOR	FIRST Name Aki	MIDDLE Initial	LAST Name Fujimura	
	RESIDENCE & CITIZENSHIP	City Saratoga	State or Foreign Country	Country of Citizen Japan	šhip
	POST OFFICE ADDRESS	Post Office Address 15220 Sobey Rd	City Saratoga	State or Country California	Zip Code 95070

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code §1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 201  A  A  T  T  T  T  T  T  T  T  T  T  T	Signature of Inventor 202  Longton  Longton
Date 6/24/2004	Date 6/24/2004
Signature of Inventor 203	Signature of Inventor 204
Date 6/24/2004	Date

(Signatures should conform to names as presented at 201 et seq. above.)



## POWER OF ATTORNEY By Assignee

<u>Cadence Design Systems, Inc.</u> assignee(s) of the application for United States Letters Patent for an improvement in

## MEASUREMENT OF INTEGRATED CIRCUIT INTERCONNECT PROCESS PARAMETERS

by Narain D. Arora, Li Song, Sr. and Aki Fujimura

the specification of which:
does hereby appoint as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and transact all business in the United States Patent and Trademark Office, and in countries other than the United States, and to do all things necessary or appropriate therefor before any competent International Authorities in connection with any international patent application(s) corresponding to the above-identified application, to Jeffrey A. Miller, Registration No. 35,287
ORRICK, HERRINGTON & SUTCLIFFE LLP 4 Park Avenue, Suite 1600 Irvine, CA 92614-2558 (650) 614-7400
Please send all inquiries to Jeffrey A. Miller, at the above referenced address.
I, the undersigned, declare that I have reviewed copies of the documentary evidence establishing chain of title to the patent application identified above from the inventor(s) to the assignee(s), which:
<ul> <li>is filed for recordation herewith; or</li> <li>was recorded at Reel, Frame; or</li> <li>has been sent for recordation under separate cover, copy attached herewith.</li> </ul>
To the best of the undersigned's knowledge and belief, title is in the assignee(s) identified above. Furthermore, the undersigned is empowered to sign this document on behalf of the assignee(s).
Full Name of Assignee: Cadence Design Systems, Inc.
Post Office Address: 2655 Seely Avenue, San Jose, CA 95134
Signature of Declarant or Assignee:  Weller   Date: 7-22-84
Full Name of Declarant
lf Other Than Assignee: Michael J. Williams
Title of Declarant: VP & Associate General
Address of Declarant: 2655 Seely Avenue, San Jose; CA 95134